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ABSTRACT

Depression and low self-esteem are commonly considered to be at the root of suicidal ideation. Previous research has examined the correlations between a lack of purpose in life and depression, low self-esteem, substance abuse and suicidal thoughts. This study investigated personality differences among student groups who have attempted suicide. Subjects (N=114) were college students who responded to questionnaires about depression, peer relations, self-acceptance, and hostility. Nineteen subjects reported attempting suicide at least once; 45 subjects reported having seriously considered suicide; and 50 subjects reported never having considered it. Even though they may have been years away from the suicide attempt, those who had attempted suicide had significantly lower self-acceptance than the other groups, and those who had considered suicide were significantly lower in self-acceptance than those who had never considered it. Those who had attempted suicide were significantly more depressed than those who had neither attempted nor considered suicide. Results suggest that a depressive personality may be as likely to cause suicide as a depressive episode. It is concluded that cognitive therapy may be helpful for these people as a preventive measure to avoid future attempts. (Author/ABL)

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Personality Correlates of People Who Have Attempted Suicide and Those Who Have Seriously Considered It

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Paper presented at the meeting of the Eastern Psychological Association, Buffalo, NY, April 1988.

Running head: PERSONALITY AND SUICIDE

Abstract

One hundred fourteen New York college students participated in a study of personality factors related to suicide attempts and suicide ideation. Biographical information was solicited and students responded to the following questionnaires: the Self-rating Depression Scale (Zung, 1974), the Index of Peer Relations (Hudson, 1977), the Self-acceptance Scale (Berger, 1981), and a Hostility Inventory (Buss & Durkee, 1957). Nineteen of the participants reported having attempted suicide at least once; forty-five participants reported having seriously considered suicide, and 50 participants had never considered it. Analyses of variance indicated significant ($p < .05$) differences among the groups on the measures of depression and self-acceptance. Even though they may be years away from the suicide attempt, those who have attempted suicide are still significantly more depressed than those who have never considered suicide. Those who have attempted suicide have significantly lower self-acceptance than the other groups, and those who have considered suicide are significantly lower in self-acceptance than those who have never considered it. Preventive measures will be discussed.

Personality Correlates of People Who Have Attempted Suicide and Those Who Have Seriously Considered It

This study will investigate personality differences among student groups who have attempted suicide, considered suicide but never attempted it, and those who have never seriously considered it. College students were chosen for study as it has been demonstrated (Salmons & Harrington, 1984) that college students have higher rates of suicidal thoughts than the general population.

Depression and low self-esteem are commonly considered to be at the root of suicidal ideation. The correlations between a lack of purpose in life and depression, low self-esteem, substance abuse and suicidal thoughts were explored by Harlow, Newcomb, and Bentler (1986). In a cross-sectional sample of 722 subjects (211 men and 511 women), the relationships among these five major conditions which may lead to suicide attempts were carefully examined. A significant relationship between lack of purpose in life and substance abuse was found for women, although this relationship did not hold for men. In contrast, there was a significant relationship between lack of purpose in life and suicidal ideation for men, whereas this was not the case for women. However, self-derogation was

significantly related to suicidal ideation in the women subjects.

Interpersonal relationships, an important source for the development of self-esteem, have been considered relevent to suidical ideation since Durkheim suggested that suicide is the result of weak ties between the individual and society (Goldstein, Baker & Jameson, 1986). Durkheim's theory suggests that if a person is well integrated into a social network, his or her own life will be meaningful and valuable. Generally speaking, people who believe that their own lives have meaning and value do not deliberately harm themselves. A person's lack of physical and emotional closeness to others increases his or her chance for suicidal behavior.

Topol (1981)pointed out that adolescent suicide attempters had many more difficulties in peer and family relationships than did non-attempters. Female attempters were the least likely to have a family member or peer in whom to confide, which is not surprising as adolescent females rely more heavily on friendships and have a greater need for a close confidant than do males. Adolescent males were less likely to discuss their problems or even admit to them for fear that they will lose their social standing.

Tousignaut and Hanigan (1986)found that differences in social support networks and differences in the type of support that young people receive when experiencing a stressful event were determining factors in suicidal ideation. They studied college students who had experienced a stressful event during the year preceeding the study and looked at differences between those who had suicidal thoughts and those who did not. The group that did not consider suicide reported that their needs were frequently met by others. They had many more important persons in their social network and received more positive reactions from their mothers than did the group that had considered suicide. Others (Ray & Johnson, 1983) have found that in societies where family ties are close, suicide rates are low; where families are not close, suicide rates are high.

Simak (1986)found that college men who seriously contemplate suicide tend to have higher academic scores and to choose occupations which require low people contact and for which one does not need extensive social contacts. Men who attempt suicide have lower academic scores and are less people oriented than the average male college student. Women who contemplate suicide tend to have higher academic scores than average; those who attempt suicide also have higher than average

academic scores and they tend to choose occupations requiring low people contact.

In contrast to Emil Durkheim who looked to social psychology for an explanation of suicidal behavior, Sigmund Freud (Goldstein et al., 1986) concentrated on unconscious processes within the individual's personality. Freud believed that suicide is an act of unconscious hostility toward a lost love object. In other words, the suicidal person identifies with the person who is lost and turns the anger inward on the self. Suicide is then viewed as an inverted homicide, since it is the outgrowth of the unconscious desire to kill someone else.

The idea that suicide is aggression turned inward was not strongly supported in a study by Lester (1967), who asked forty-three college students to complete the DeVries Suicide Potential Scale, the Buss-Durkee Hostility Inventory, and answer questions about their personal experiences with suicidal thoughts and attempts. Those who had attempted or threatened suicide did not differ from nonsuicidal subjects in their manner of expressing aggression, although suicidal subjects were significantly more irritable and had significantly more resentment than the nonsuicidal subjects.

The following questions will be investigated in

this study: (1) Do those who attempt suicide and those who consider it have higher than average rates of depression? (2) Do they have more unsatisfactory peer relationships than the average person? (3) Do those who attempt suicide and those who consider it have lower than average rates of self-acceptance? (4) Are they more hostile than the average person?

Method

Subjects

The subjects in this study were 114 New York college students (71 females, 43 males) who ranged in age from 18 to 43. Their mean age was 22.2 years. Subjects were recruited while passing through the Campus Center, and questionnaires were also distributed to two evening psychology classes. Four of the questionnaires were returned incomplete and dropped from the study.

The completed questionnaires were divided into three groups: those who had attempted suicide, those who had considered suicide, and those who had never attempted or considered suicide (control). Nineteen subjects (11 females, 7 males, 1 unspecified) were assigned to the attempted group. Forty-two percent of this group came from divorced homes, 11% had parents who were separated, and one subject had a parent whose death preceeded her birth. Thirty-two percent had a relative

or friend who had either attempted or committed suicide. Twenty-one percent had attempted suicide more than once. The earliest reported age of attempt was 12 years; one subject had attempted suicide four times, beginning at age 14.

Questionnaires

The Self-rating Depression Scale (Zung, 1974) consists of 20 statements and a four point likert scale. Subjects are asked to indicate the extent of their agreement with items such as "I feel downhearted and blue" and "I feel that I am useful and needed". Low scorers (20-32) report few indications of depression. Medium scorers (33-50) are reporting mild to moderate feelings of depression, and high scorers (51-80) are reporting a potentially severe level of depression.

The Index of Peer Relations (Hudson, 1977) measures feelings toward one's peer group. Using a five point likert scale, subjects are asked to respond to statements such as "I get along very well with my peers" and "My peers seem to look down on me". A low score on this test is a high level of satisfaction, so those with below average scores (0-30) are most comfortable with their peer group. Above average scorers (31-100) report serious problems in relating to their peers.

The Self-acceptance scale (Berger, 1981) consists

of 36 items and a five point likert scale. Subjects are asked to indicate the extent of their agreement with such statements as "I don't question my worth as a person even if I think others do" and "I am frequently bothered by feelings of inferiority". High scorers (151-180) show little self-confidence; they have a negative view of the self and believe that this view is shared by others. Average scores (111-150) reflect the level of acceptance most people feel - liking ourselves one moment, disliking ourselves the next. Low scorers (0-110) indicate confident individuals with overall positive feelings toward themselves.

The Hostility Inventory (Buss & Durkee, 1957) consists of 66 statements which are to be marked true or false. Seven subscales (assault, indirect hostility, negativism, resentment, suspicion, verbal hostility, and irritability) can be scored, and an overall score can also be calculated. An overall score of 38 or less reflects the hostility range experienced by most people. Scores totalling more than 38 indicate a high level of hostility which may make daily life and relations with others difficult and unpleasant.

Subjects also responded to an autobiographical questionnaire prepared by the experimenters. They were asked their age, gender, marital status of their

parents, and whether any friend or relative had attempted or committed suicide. Subjects were also asked whether they had attempted or considered suicide and at what age the attempt was made.

Procedure

Questionnaires were always presented in the same order and were stapled together in packets. The autobiographical questionnaire appeared first, followed by the Self-rating depression scale, Index of Peer Relations, Self-acceptance Scale, and the Hostility Inventory.

Subjects were told that the study was being conducted for a senior thesis on the moods and attitudes of college students. Most of the students approached showed a willingness to complete the questionnaires. The completion of the questionnaires took approximately 20 - 25 minutes; most subjects completed them in the presence of one of the experimenters. The subjects were advised that participation was purely voluntary and that those who did not wish to participate could withdraw at any point. All were informed that their responses were anonymous and confidential.

Results

Is depression related to suicide attempts and thoughts of suicide? The means and standard deviations for the subjects scores on the Self-rating depression scale are presented in Table 1.

Insert Table 1 about here

Those who attempted suicide were the most depressed, followed by those who have considered suicide, with the control group least depressed. Although all three groups scored in the moderate range, the analysis of variance shows a significant ($p < .05$) difference among the groups. Follow up Scheffe tests indicated that those who attempted suicide are significantly ($p < .05$) more depressed than those who have never considered suicide. Other group differences did not reach significance.

Are unsatisfactory peer relationships related to suicide and thoughts of suicide? The means and standard deviations as presented in Table 2 show very little variation among the groups.

Insert Table 2 about here

An analysis of variance indicated that these differences are not significant. All groups were in the below average, comfortable with their peer group range.

Is low self-esteem related to suicide attempts and thoughts of suicide? Keeping in mind that the Self-acceptance Scale is keyed negatively, one can see in Table 3 that those who have attempted suicide have the lowest self-acceptance, followed by those who have considered suicide and those who have never considered it.

Insert Table 3 about here

Although all groups were in the low scoring range, expressing little self-acceptance, an analysis of variance indicates that these differences are significant ($p < .05$). Follow up Scheffe tests indicate that each group is significantly ($p < .05$) different from the others. Those who have attempted suicide have significantly less self-acceptance than those who have considered and those who have never considered suicide. In addition, those who have considered suicide have significantly less self-acceptance than those who have never considered it.

Is hostility related to suicide and thoughts of

suicide? The means and standard deviations presented in Table 4 show very little variation among the groups.

Insert Table 4 about here

Although those who have considered suicide have higher hostility scores than the other two groups, all means are in the low range indicating a typical amount of hostility. The analysis of variance indicates that there are no significant differences among the groups.

Discussion

In line with the findings of previous studies relating depression to suicide (Jones et al, 1986; Harlow et al, 1986), the results of the present study indicate that those who have attempted suicide were significantly more depressed than those who have neither attempted nor considered suicide. Although the attempts were made some years ago, this investigation reveals that the basic tendency toward depression still exists in these subjects. This, we believe, is an important finding, suggesting that a depressive personality may be as likely to cause suicide as a depressive episode. It is not too late to intervene; cognitive therapy may be helpful for these people as a preventive measure to avoid future attempts.

Previous findings indicating a relationship between poor social support and suicide (Topol, 1981; Toulisignant & Hannigan, 1986) were not supported by this study. Subjects in all three groups experienced good peer relations. The average time that elapsed between the age at the suicide attempt and the subjects' current age is 4.5 years. Their relationships may have improved during the intervening years. It is also possible that a suicide attempt can cause friends to show more care and attention.

One cannot conclude that a person is suicide prone if he or she does not have good peer relations. A person who has low self-esteem may be suicidal even if he or she has a social support network. Therfore, the peer relations factor may not be an important one in predicting whether or not someone is suicide prone.

The most important finding of this study is low self-acceptance as a major factor in suicidal ideation and attempts. The group differences in self-acceptance support the results of earlier studies (Harlow et al, 1986) of the importance of self-esteem in suicide attempts.

Low self-esteem is related to the inability of an individual to cope with a new environment. Even when there is a desire to become comfortable in a new

setting, low self-esteem may inhibit the attainment of the goal. For suicide prone individuals, depression sets in and a suicide attempt can result. A person with good or normal self-esteem and a desire to become comfortable in a new environment will eventually reach the goal. Consider students rejected by a fraternity or sorority. Those with normal self-esteem may be temporarily depressed by the rejection, but will soon overcome their feelings of rejection. Those who believe themselves unworthy may not be able to overcome the rejection. Similarly, the typical student enters college with students who have higher academic credentials. Those students with low self-esteem and feelings of unworthiness may deteriorate daily because of a perceived sense of being less able than their peers.

Although most of the subjects in this study attempted or considered suicide some years ago, the findings reveal that the effects of these thoughts may still be strong. Perhaps knowing that one has attempted or planned to attempt suicide contributes to and reinforces low self-esteem and depression.

The finding that hostility was not related to suicide attempts or ideation is in line with previous studies (Lester, 1967), which did not support Freud's

theory that suicide is anger turned inward.

The results of this study suggest once again the importance of family, friends, and professionals in the prevention of suicide. It appears that the most important signs to watch for are those of depression and low self-esteem. Perhaps psychological testing should be included with the placement tests and other forms completed by entering freshmen each year. This would be one way for counseling centers to locate the depressed students and those with low self-esteem before the stresses of adjustment to college life take their toll.

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Table 1

Means, standard deviations, and analysis of variance on the Self-rating Depression Scale (SRDS) for those who have attempted suicide (N=19), those who have considered it (N=45), and those who have never considered suicide.

SRDS	Attempted	Considered	Control	F
X	44.7	41.1	36.9	4.91*
s	11.2	9.5	9.7	

*p<.05

Table 2

Means, standard deviations, and analysis of variance on the Index of Peer Relations (IPR) for those who have attempted suicide (N=19), those who have considered it (N=45), and those who have never considered suicide (N=50).

IPR	Attempted	Considered	Control	F
X	27.7	26.9	22.3	1.12
s	16.4	15.8	17.9	

Table 3

Means, standard deviations, and analysis of variance on the Self-acceptance Scale (SAS) for those who have attempted suicide (N=19), those who have considered suicide (N=45), and those who have never considered it (N=50).

SAS	Attempted	Considered	Control	F
X	95.7	90.8	76.7	8.47*
s	24.9	19.1	19.1	

*p < .05

Table 4

Means, standard deviations, and analysis of variance on the Hostility Inventory (HI) for those who have attempted suicide (N=19), those who have considered suicide (N=45), and those who have never considered suicide (N=50).

HI	Attempted	Considered	Control	F
X	31.8	35.8	30.6	3.06
s	10.2	10.7	9.9	